again, put it back to Parliament. This is the structure which had been required for the last 30, 40 years and, ultimately, we are doing it. We have gone through a lot of discussion process. Now, Sir, the building is ready. We have inaugurated the building. The entire structure is there. And, the Drug Authority will have divisions of drugs, vaccines, ayurvedic products, medical devices, etc.

MR. CHAIRMAN: Thank you. Let us get on to the next supplementary.

SHRI S.S. AHLUWALIA: Sir, 'standard' means quality, quantity and price. I have with me a price list of Livo Proxacine. The cost of ten tablets is Rs.80/- and the cost of five tablets is Rs.800/-. Why is this so? One doctor told me to take five tables for Rs.800/- because that will be useful. All tables are of 500 mg. How is it different? Is it sub-standard? Have you checked up this? Why are they doing so? Why is one tablet of Rs.800 equal to three tablets?

DR. ANBUMANI RAMDOSS: Sir, 'pricing' does not come under my Ministry. My colleague, Mr. Paswan's Ministry handles the pricing issue. Nevertheless if you can give me some more information about that, I would, definitely, give it to my colleague, Mr. Paswan.

श्री अवतार सिंह करीमपुरी: सर, मंत्री जी ने अपने जवाब में कहा है कि no survey has been conducted to find out the quality of drugs, जबकि यह बहुत ही गम्भीर मामला है। मैं आपके माध्यम से मंत्री जी से यह जानना चाहता हूं कि अगर आपने drugs की quality को control करने के लिए पहले कोई सर्वे नहीं कराया है, तो क्या आइन्दा सर्वे कराएंगे? सर, मेरे प्रश्न का दूसरा भाग यह है कि मार्केट में जो new product launch किया जाता है, उसका क्या procedure है?

DR. ANBUMANI RAMDOSS: Sir, there have been some issues about India being a spurious drug market which is completely unconfirmed. India has the highest US FDA approved Pharmaceuticals outside the United States. So, that quality standard we are having. Surveys have been done and now we are in the midst of huge surveys being done by the Department itself. The earlier survey was done by the SEAR-Pharm Forum in association with the SEARO region of the WHO. They have been involved in that, and they have said that the extent of counterfeit suspects was to the tune of about 3.1 per cent, the suspected. But the actual, they say, is even low. It is even lower than that.

Coming to the new drugs, Sir, with regard to some of the new drugs we have, there are these Pharmaco Vigilance Committees all over the country, and any suspected adverse drug reactions or post-marketing surveillance reaction, etc., will be monitored by these Pharmaco Vigilance Committees.

MR. CHAIRMAN: Question Hour is over.

WRITTEN ANSWERS TO STARRED QUESTIONS

Export of sugar

*81. DR. T. SUBBARAMI REDDY: Will the Minister of CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION be pleased to state:

(a) whether Government plans to check sugar exports *via* advance licence;

(b) if so, whether under this licence scheme sugar millers will have to obtain his Ministry's release orders for shipping out any consignment;

(c) whether India is still facing shortage of sugar;

(d) whether Government is also planning to extend Release Orders (RO) dispensation to cover re-export commitments under Advance Licence (AL) scheme and the scheme also requires mills to re-export one tonne of white sugar for every 1.05 tonnes of raw-sugar they import duty free; and

(e) if so, to what extent it has helped to check sugar exports?

THE MINISTER OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION (SHRI SHARAD PAWAR): (a) to (e) The Central Government in its decision dated 28.01.2009 has allowed sugar mills to import raw sugar under Advance Authorization Scheme upto 30.09.2009 and permitted sugar factories to sell processed raw sugar in the domestic market and fulfill export obligation on 'ton-to-ton' basis. A wastage of 5% has been allowed under Standard Input Output Norms (SION-52) on import of raw sugar and export of white sugar.

The sugar production in India is cyclic in nature; two-to-three years of high production are followed by two-to-three years of low production. The production of sugar is likely to be less than the consumption but keeping in view large opening stock in the beginning of the season, there would be adequate availability of sugar in the current sugar season.

The requirement of obtaining release orders for export of sugar under Open General Category has been re-introduced with effect from 01.01.2009 and for export of sugar under Advance Authorization Scheme with effect from 13.02.2009. This would enable the Government to judiciously issue export release orders whether under Open General License or under Advance Authorization Scheme.

Since the requirement of obtaining export release order has been re-introduced a few days back, it is too early to assess its impact.

Infected Ice-cream

†*86.SHRIMATI SUSHMA SWARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that according to the Indian Council of Medical Research, the tests of samples of ice-creams have been found infected;

(b) if so, the number of samples taken and how many of them were found infected and the details thereof; and

(c) the efforts being made to improve the quality of ice-creams?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) As per the information available, Indian Council of Medical Research has not tested any samples of ice-cream. However, a letter has been published in Indian Journal of Medical Research wherein

†Original notice of the question was received in Hindi.